Adults with Cerebral Palsy:
Factors Influencing Independent Living and Perceived Quality of Life

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**PURPOSE**
- Explore and identify the lived experience of adults with cerebral palsy (CP) living in their community
- Examine the factors which influence their activity level and participation and how these factors influenced their perceived quality of life

**SPECIFIC AIMS**
- Determine the relationship of the Gross Motor Function Classification System (GMFCS) levels of motor function and the World Health Organization Disability Assessment (WHODAS II) physical domain
- Compare the domains of the WHODAS II and the World Health Organization Quality of Life –BREF (WHQOL-BREF) instruments in adults with CP
- Examine the relationship among physical and social factors and the four domains of the WHQOL-BREF in adults with CP

**Qualitative Question**
For adults with CP, which factors influence living independently in the community and affect their perceived quality of life?

**METHODS**

**Recruitment**
- Ethical approval from Rocky Mountain University of Health Profession IRB
- Snowball sampling
- Referrals

**Measurement Instruments:**
- Quantitative measures: GMFCS, WHODAS II, WHQOL-BREF
- Qualitative measures: Researcher role, Interview guide: open-ended questions developed from the WHQOL-BREF, audio-taped and/or videotaped interviews

**Data Analysis:**
- Quantitative data: SPSS 17.0; Qualitative data: N Vivo-8, analytical steps, taped interviews

**RESULTS**

**Demographics:** Age range: 19 years to 61 years
- Quantitative: Mean age: 30.5 years; 14 male (m), 16 female (f); 50% Caucasian, 20% African-American; 90% spastic; 40% diplegia and tetraplegia; 37% GMFCS II, 20% GMFCS IV; 40% community college; 63% living with parents, 23% living with others
- Qualitative: Mean age: 30.1 years; 6 (m), 9 (f); 53% Caucasian, 20% Asian; 100% spastic; 40% tetraplegia; 33% hemiplegia; 33% GMFCS II, 27% GMFCS III; 40% college graduate; 60% living with parents, 33% living with others

**Conclusions**
In this study, motor level and degree of impairments of participants did not significantly determine their living independently or their PQOL. Participation in activities, school, and work influenced living independently and PQOL. All these factors influenced one another. Participation in activities, school, or work influenced living independently and PQOL.

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Selected References available upon request. Email: sheneunice@hotmail.com

**Legend:** ADL-activities of daily living; Barrier, Challenges, Problem; CogA-cognitive ability; CHS-current health status; DI –degree of impairment; DI –degree of impairment; FR-financial resources; HC-health condition; IADL-instrumental activities of daily living; LI-living independently; PIQOL-perceived quality of life; SE-self efficacy; SS-social support; SI/C self image/concepts; SB-social support.

**New Conceptual Framework**

**Qualitative Study Results**
13 themes identified: ADL; IADL; health condition; current health status; degree of impairment; financial resources; social support; barriers, challenges, and problems faced; self-concept; self-efficacy, cognitive ability; dreams and hope: living independently; perceived quality of life
Themes were categorized using the WHO International Classification of Function (ICF) terms: activity limitation, participation, environment, and personal factors
A new conceptual framework was developed. Participants identified factors that influenced their living independently and PQOL. All these factors influenced one another. Participation in activities, school, and work influenced living independently and PQOL.

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